

| PATENT APPLICATION FEE DETERMINATION RECORD  |                                  |                                    |               |  | Application or Docking Number<br><b>09817361</b> |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
|--|----------------------------------|------------------------------------|---------------|--|--|--|-----|----------------------------------|------------------------------------|----------------------------|------------------------|---|-------------------------------|---------------|------------------------------|-------------------------------------|-------------|--|---|--|--|------|------|----------------|------|------|------|------|------|------|-----------------|-------|------|----------------|------|--|------|------|------|------|-----------------|------|--|-------|--|
| Substitute for Form PTO-875  |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <p><b>CLAIMS AS FILED - PART I</b></p> <p>(Column 1) (Column 2)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>FOR</th> <th>NUMBER FILED</th> <th>NUMBER EXTRA</th> </tr> </thead> <tbody> <tr> <td>BASIC FEE (37 CFR 1.16(d))</td> <td></td> <td></td> </tr> <tr> <td>TOTAL CLAIMS (37 CFR 1.16(c))</td> <td style="text-align: center;">10 minus 20 =</td> <td></td> </tr> <tr> <td>INDEPENDENT CLAIMS (37 CFR 1.16(d))</td> <td style="text-align: center;">2 minus 3 =</td> <td></td> </tr> <tr> <td colspan="3">MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))</td> </tr> </tbody> </table> </div> <div style="width: 20%;"> <p><b>SMALL ENTITY</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>RATE</th> <th>FEE</th> </tr> </thead> <tbody> <tr> <td></td> <td style="text-align: center;">395</td> </tr> <tr> <td>x \$</td> <td></td> </tr> <tr> <td>x \$</td> <td></td> </tr> <tr> <td>+ \$</td> <td></td> </tr> <tr> <td>TOTAL</td> <td style="text-align: center;">395</td> </tr> </tbody> </table> </div> <div style="width: 20%;"> <p><b>OTHER THAN SMALL ENTITY</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>RATE</th> <th>FEE</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> <tr> <td>x \$</td> <td></td> </tr> <tr> <td>x \$</td> <td></td> </tr> <tr> <td>+ \$</td> <td></td> </tr> <tr> <td>TOTAL</td> <td></td> </tr> </tbody> </table> </div> </div> |                                  |                                    |               |  |  |  | FOR | NUMBER FILED                     | NUMBER EXTRA                       | BASIC FEE (37 CFR 1.16(d)) |                        |   | TOTAL CLAIMS (37 CFR 1.16(c)) | 10 minus 20 = |                              | INDEPENDENT CLAIMS (37 CFR 1.16(d)) | 2 minus 3 = |  | MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))               |  |  | RATE | FEE  |                | 395  | x \$ |      | x \$ |      | + \$ |                 | TOTAL | 395  | RATE           | FEE  |  |      | x \$ |      | x \$ |                 | + \$ |  | TOTAL |  |
| FOR  | NUMBER FILED                     | NUMBER EXTRA                       |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| BASIC FEE (37 CFR 1.16(d))   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| TOTAL CLAIMS (37 CFR 1.16(c))  | 10 minus 20 =                    |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| INDEPENDENT CLAIMS (37 CFR 1.16(d))  | 2 minus 3 =                      |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))  |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| RATE   | FEE                              |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
|  | 395                              |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| x \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| x \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| + \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| TOTAL  | 395                              |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| RATE   | FEE                              |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
|  |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| x \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| x \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| + \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| TOTAL  |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| <p>* If the difference in column 1 is less than zero, enter "0" in column 2.</p>   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| CLAIMS AS AMENDED - PART II  |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
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|  | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| Total (37 CFR 1.16(d))   | 9                                | 20                                 |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| Independent (37 CFR 1.16(d))   | 2                                | 3                                  |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))  |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| RATE   | ADDITIONAL FEE                   |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| x \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| x \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| + \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| TOTAL ADD'L FEE  |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| RATE   | ADDITIONAL FEE                   |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| x \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| x \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| + \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| TOTAL ADD'L FEE  |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
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|  | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| Total (37 CFR 1.16(d))   | 9                                | 20                                 |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| Independent (37 CFR 1.16(d))   | 2                                | 3                                  |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))  |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| RATE   | ADDITIONAL FEE                   |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| x \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| x \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| + \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| TOTAL ADD'L FEE  |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| RATE   | ADDITIONAL FEE                   |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| x \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| x \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| + \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| TOTAL ADD'L FEE  |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <p><b>AMENDMENT C</b></p> <p>(Column 1) (Column 2) (Column 3)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>CLAIMS REMAINING AFTER AMENDMENT</th> <th>HIGHEST NUMBER PREVIOUSLY PAID FOR</th> <th>PRESENT EXTRA</th> </tr> </thead> <tbody> <tr> <td>Total (37 CFR 1.16(d))</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Independent (37 CFR 1.16(d))</td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="4">FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))</td> </tr> </tbody> </table> </div> <div style="width: 20%;"> <p><b>SMALL ENTITY</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>RATE</th> <th>ADDITIONAL FEE</th> </tr> </thead> <tbody> <tr> <td>x \$</td> <td></td> </tr> <tr> <td>x \$</td> <td></td> </tr> <tr> <td>+ \$</td> <td></td> </tr> <tr> <td>TOTAL ADD'L FEE</td> <td></td> </tr> </tbody> </table> </div> <div style="width: 20%;"> <p><b>OTHER THAN SMALL ENTITY</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>RATE</th> <th>ADDITIONAL FEE</th> </tr> </thead> <tbody> <tr> <td>x \$</td> <td></td> </tr> <tr> <td>x \$</td> <td></td> </tr> <tr> <td>+ \$</td> <td></td> </tr> <tr> <td>TOTAL ADD'L FEE</td> <td></td> </tr> </tbody> </table> </div> </div>  |                                  |                                    |               |  |  |  |     | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA              | Total (37 CFR 1.16(d)) |   |                               |               | Independent (37 CFR 1.16(d)) |                                     |             |  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) |  |  |      | RATE | ADDITIONAL FEE | x \$ |      | x \$ |      | + \$ |      | TOTAL ADD'L FEE |       | RATE | ADDITIONAL FEE | x \$ |  | x \$ |      | + \$ |      | TOTAL ADD'L FEE |      |  |       |  |
|  | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| Total (37 CFR 1.16(d))   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| Independent (37 CFR 1.16(d))   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))  |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| RATE   | ADDITIONAL FEE                   |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| x \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| x \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| + \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| TOTAL ADD'L FEE  |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| RATE   | ADDITIONAL FEE                   |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| x \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| x \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| + \$   |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |
| TOTAL ADD'L FEE  |                                  |                                    |               |  |  |  |     |                                  |                                    |                            |                        |   |                               |               |                              |                                     |             |  |   |  |  |      |      |                |      |      |      |      |      |      |                 |       |      |                |      |  |      |      |      |      |                 |      |  |       |  |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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